



Family Name						
Given Name/s						
Student Number						
Teaching Period	Semester 2, 2017					

PSY353 – Abnormal Psychology	<b>DURATION</b>	
	Reading Time:	10 minutes
	Writing Time:	180 minutes
<b>INSTRUCTIONS TO CANDIDATES</b>		
The examination has <b>4</b> sections		
<b>Section A:</b> Suggested Time: 60 min	<b>Multiple Choice Questions:</b> Answer ALL 75 questions 75 Marks	
<b>Section B:</b> Suggested Time: 45 min	<b>Short Answer Questions:</b> Answer ALL 5 questions 10 Marks	
<b>Section C:</b> Suggested Time: 30 min	<b>Fill-in-the-Blank Questions:</b> Answer ALL 5 questions 10 Marks	
<b>Section D:</b> Suggested Time: 45 min	<b>Short Essay Questions:</b> Answer the 1 question 5 Marks	
<p>Section A must be answered on the Answer sheet provided and must be handed in with your answer booklet. Please ensure that your name and student number are clearly indicated on your Answer Sheet and at the top of this examination paper.</p> <p>Section B and Section C are to be answered directly on the Examination Paper.</p> <p>Section D is to be answered in the Examination Booklet. Please ensure that your Name and Student Number are written clearly on the Examination Booklet.</p>		
<b>EXAM CONDITIONS</b>		
<u>You may begin writing from the commencement of the examination session.</u> The reading time indicated above is provided as a guide only.		
This is a CLOSED BOOK examination		
No calculators are permitted		
No handwritten notes are permitted		
No dictionaries are permitted		
<b>ADDITIONAL AUTHORISED MATERIALS</b>	<b>EXAMINATION MATERIALS TO BE SUPPLIED</b>	
No additional printed material is permitted	1 x 8 Page Book 1 x 4-Multiple Choice Answer Sheet	

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**Section A**  
**Multiple Choice Questions**  
**Total No of Marks for this section: 75**

This section should be answered on the Multiple Choice Answer Sheet provided. Please ensure that your name and student number have been written on the Answer Sheet and place in the completed answer Booklet.

Marks for each question are indicated. Suggested Time allocation for Section A: 60

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**Section B**  
**Short Answer Questions**  
**Total No of Marks for this section: 10**

Questions in this section should be answered in the space below each question.

Marks for each question are indicated. Suggested Time allocation for Section B: 45 mins

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**Question 1**

Describe diagnostic criteria for Body Dysmorphic Disorder.

(Marks: 2)

**Question 2**

Describe the “positive” and “negative” symptoms of Schizophrenia.

(Marks: 2)

### **Question 3**

Define dissociative amnesia.

(Marks: 2)

### **Question 4**

Define illness anxiety disorder.

(Marks: 2)

### **Question 5**

Describe the symptoms of major depressive disorder.

(Marks: 2)

**Section C**  
**Fill-in-the-Blank Questions**  
**Total Number of Marks for this section: 10**

Questions in this section should be answered in the line provided for each question. Identify the most likely disorder for each question. Provide the correct DSM-5 diagnostic label.

Marks for each question are indicated. Suggested Time allocation for Section C: 30 mins

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**Question 1**

July is a 30 year old bank executive who is brought for evaluation by her husband. According to him, July began acting strange 2 weeks ago when she began staying up later at night. He was initially not too concerned until she began awakening him to talk about the “revolutionary” new ideas she had about creating an international bank cartel. He notes she was “full of energy” and talked rapidly about the many ideas that she had. He became quite concerned when at 3 A.M. July telephoned the president of the bank where she works to discuss her ideas. On examination July’s speech is quite rapid and she jumps quickly from one subject to another. She is on no medications and has no prior psychiatric history. Her physical examination is normal and toxic screen for drugs is negative. July most likely has a DSM-5 diagnosis of:

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(Marks: 2)

**Question 2**

For as long as local residents can remember, Tom, a 46 year old, single man has lived alone a couple of miles outside of town. Although frequently seen along the road, and occasionally in town, he doesn't visit the local pubs or cafes and has never been known to socialize. Tom makes his living fixing things, at which he is quite adept, but chooses not to open a shop in town. He seems indifferent to praise, advice, or complaints from his customers, generally answering with a nondescript shrug and continuing his work. He never married and rarely visits family who live nearby. When people offer greetings or friendly conversation, Tom remains aloof, barely acknowledging their comments. He has never been in trouble with the law, and has had no known hallucinations, delusions, or psychiatric treatment. If he were to be diagnosed, it would most likely be with:

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(Marks: 2)

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### Question 3

Chelsey, a 22 year old female seeks psychological help because of sexual concerns that are becoming quite distressing. She has not been able to attain orgasm with her husband of 3 months, although she feels attracted to him, has arousing fantasies about him, describes normal physiological signs of arousal, and otherwise enjoys their sexual activity. Intercourse is not painful for her. She rarely achieves orgasm through masturbation. Her gynecologist found no physical abnormalities. Chelsey most likely has:

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(Marks: 2)

### Question 4

John is a fourth grader of average intelligence from a middle-class family who has always had difficulty with arithmetic. Now that he is taking science classes, the deficit affects more than his math's grade, which is always failing or near failing. His performance in other subjects, such as writing and reading, is average. John scored in the lowest 3-4% on standardized math's tests but is in the normal range on verbal measures. His mother reports that he avoids math's homework and he becomes irritable when forced to do it. He would most likely be diagnosed with:

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(Marks: 2)

### Question 5

Mary, a 37 year old woman, was arrested after harassing a local television newscaster with telephone calls and letters asserting that he had fathered, and then absconded with her child. She denied any wish to harm him but steadfastly pursued him with demands that he give her "visitation rights" to "their" child. There was no indication that the newscaster had ever had a relationship with Mary, although evidence from her files and from her apartment indicated that her fantasized relationship with him had existed for several years. There was no indication of hallucinations, disturbance of affect/mood, or organic illness. Mary would most likely be diagnosed with:

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(Marks: 2)



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**Section D**  
**Short Essay Question**  
**Total Number of Marks for this section: 5**

This section should be answered in the Answer Booklet provided.

Marks for the question are indicated. Suggested Time allocation for Section D: 45 mins

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**Question 1 of 1**

**THE CASE**

Bill was a 42-year-old single man who lived with his parents, worked as an accountant after university. Bill had been underemployed over the preceding several years. Currently, Bill was working part-time. Bill had an extensive history of depressive episodes dating back to his high school years. Over the years, these periods of depression were characterized by depressed mood, a loss of interest in activities he previously enjoyed (at the intake evaluation, Bill stated, "I suffer even when doing things, I should enjoy"), concentration difficulties and problems making decisions, and feelings of guilt and worthlessness (e.g., feeling that he was not a contributing member of his family or society, with little expectation of becoming one). In addition, Bill experienced recurrent thoughts of suicide and had a history of four suicide attempts. Bill's first suicide attempt occurred during secondary school when he "crashed the family car on purpose because I wanted to die." Each of his other suicide attempts had occurred over the past 3 years; on all three occasions, Bill had tried to hang himself.

During his first year of university, Bill experienced a 2-week period when his mood was both excessively elevated and excessively agitated. In addition to feeling like he was on a high and very energetic, Bill became quite talkative and spoke very loudly and very quickly. He became even more distractible and was often late or missed classes and appointments because he would be engrossed in some trivial task (such as rearranging the furniture in his room). Over the ensuing years, Bill continued to experience bouts of depression as well as periods when his mood was elevated, agitated, or expansive. In fact, during subsequent "high" periods, Bill wrecked a car by driving at dangerous speeds on two other occasions. At one point, he had his driver's license revoked for 1 year. In other episodes, Bill had gone on buying sprees, spending thousands of dollars (primarily his parents' money because Bill had not held down a steady job since his position as an accountant) on vitamins, gifts for his family, and books. Although Bill paced a lot when he was worried about something, most of his pacing had occurred during periods when he felt excessively energetic or agitated.

However, when Bill was not feeling very down or very high, he experienced few symptoms. For instance, during these between-episode periods, Bill did not entertain any thoughts or hear any voices involving the police or the government.

**THE QUESTION**

Discuss the most appropriate diagnosis for Bill (the one that captures his symptoms the best) and why you chose it over other relevant possibilities (specify the other relevant possibilities).

